

**CITY OF READING**  
**Family Friday Night Lights Registration**

Name of Family: \_\_\_\_\_

# of Adults Attending: \_\_\_\_\_ # of Children Attending: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Zip

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Phone#: \_\_\_\_\_

**Please check which program you are registering for:**

\_\_\_\_\_ **Friday Night Lights – June 24, 2011**

\_\_\_\_\_ **Friday Night Lights – July 8, 2011**

\_\_\_\_\_ **Friday Night Lights – July 22, 2011**

\_\_\_\_\_ **Friday Night Lights – August 12, 2011**

**Mail to:**            *Recreation Office*  
                         *Attn: Tennis Program*  
                         *320 South 3<sup>rd</sup> Street*  
                         *Reading PA 19602*

**I AM WILLING TO BRING A DONATION:**

\_\_\_\_\_ snack    \_\_\_\_\_ drink

The undersigned in consideration of admittance to this activity does hereby for myself, my minor child, all heirs, successors, and assigns agree to release, waive, and forever discharge from all liabilities and further agree to indemnity, save and hold harmless the City of Reading, Division of Recreation, Council members, agents and employees from any loss, liability, damage, or costs which may be incurred due to participation in this activity.

I hereby authorize and grant permission to the City of Reading and any of its authorized agents to use my photographic image for any electronic or non-electronic form or media. I agree that my image may be reproduced, edited and used in whole or in part for any and all media, including, without limitation, print, audio-visual, multimedia and/or exhibition purposes, in any manner, in perpetuity and throughout the world. I understand and agree that I have no rights to any benefits derived from any such image. I expressly release and forever discharge the City of Reading and any of its authorized agents any and all claims and demands of any kind whatsoever in relation to, or arising out of the use of my photographic image. I have read this release before signing below, and I fully understand the contents, meanings and impact of this release and waiver.

SIGNATURE OF PARTICIPANT: \_\_\_\_\_

(if participant is under 18, Parent or Guardian signature required)

DATE: \_\_\_\_\_